

TLC Trial Form HOMELOG.03 Home Assessment Log

Center ID:	_____ - _____
Screening ID:	S _____ - _____
Study ID:	T _____ - _____
House ID:	_____

INSTRUCTIONS: This form is to be filled out whenever a home is assessed for TLC cleanup and is considered acceptable for cleanup, either during the Screening Period or after the child has been randomized. More than one such assessment may occur for a child at a given location during the course of the Trial. Therefore, it is important to fill in the House ID number (assigned sequentially for each location that is assessed for each child) and the number of times that this particular home has been assessed (in Visit Code). For example, Visit Code H1-3 indicates that this is the third assessment for this house. Check rooms in the same order as on the TLC Floor Plan.

For clinic use only

Log number _____

1. **Date of cleanup** _____ / _____ / _____ *mm/dd/yy*

RESIDENCE INFORMATION

2. **Child's full name** _____
Full name

3. **Address of building being assessed** _____
Address

City, State, Zip

4. **Number of floors assessed** _____

5. **Responsible adult** _____
Name *Phone*

6. Does this child regularly spend time at other homes or locations?
 No Yes

7. Is permission for repairs and/or cleaning common areas needed from the property owner?
 No Yes

If permission is needed from landlord, please provide the following information:

8. **Property Owner** _____
Name *Phone*

Address

City, State, Zip

Center ID: _____ - _____
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 House ID: _____

EXTERIOR FRONT

Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Door and frame	0=No paint	1=Cleanable	
Windows, sills, sashes, frames	1=Good	2=Cleanable with effort	
Walls	2=Fair	3=Not cleanable	
Porch floor	3=Poor		
Porch rails, posts, spindles			
Ceiling			

VESTIBULE

Floor Plan Letter _____

Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Door and frame	0=No paint	1=Cleanable	
Walls	1=Good	2=Cleanable with effort	
Wall trim	2=Fair	3=Not cleanable	
Floor	3=Poor		
Ceiling			

LIVING ROOM

Floor Plan Letter _____

Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Doors and frames	0=No paint	1=Cleanable	
Windows, sills, sashes, frames	1=Good	2=Cleanable with effort	
Closet doors and frames	2=Fair	3=Not cleanable	
Baseboards	3=Poor		
Radiators, covers, pipes			
Walls			
Ceiling			
Floor			

Center ID: _____ - _____
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DINING ROOM

Floor Plan Letter _____

Accessibility

()₁ None / rare

()₂ Occasional

()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Doors and frames	0=No paint	1=Cleanable	
Windows, sills, sashes, frames	1=Good	2=Cleanable with effort	
Closet doors and frames	2=Fair	3=Not cleanable	
Baseboards	3=Poor		
Radiators, covers, pipes			
Walls			
Ceiling			
Floor			

KITCHEN

Floor Plan Letter _____

Accessibility

()₁ None / rare

()₂ Occasional

()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Doors and frames	0=No paint	1=Cleanable	
Windows, sills, sashes, frames	1=Good	2=Cleanable with effort	
Closet doors and frames	2=Fair	3=Not cleanable	
Baseboards	3=Poor		
Radiators, covers, pipes			
Walls			
Ceiling			
Floor			

1st FLR BATHROOM

Floor Plan Letter _____

Accessibility

()₁ None / rare

()₂ Occasional

()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Doors and frames	0=No paint	1=Cleanable	
Windows, sills, sashes, frames	1=Good	2=Cleanable with effort	
Cabinets, doors, frames, shelves	2=Fair	3=Not cleanable	
Closet doors and frames	3=Poor		
Baseboards			
Radiators, covers, pipes			
Tub and fixtures			
Walls			
Ceiling			
Floor			

Center ID: _____ - _____
 Screening ID: S _____ - _____
 Study ID: T _____ - _____
 House ID: _____

OTHER 1ST FLR Floor Plan Letter _____ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Doors and frames	0=No paint	1=Cleanable	
Windows, sills, sashes, frames	1=Good	2=Cleanable with effort	
Closet doors and frames	2=Fair	3=Not cleanable	
Baseboards	3=Poor		
Radiators, covers, pipes			
Walls			
Ceiling			
Floor			

1ST - 2ND FLR STAIR Floor Plan Letter _____ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Rails, posts, spindles	0=No paint	1=Cleanable	
Baseboards	1=Good	2=Cleanable with effort	
Treads and risers	2=Fair	3=Not cleanable	
Skirts, upper and lower	3=Poor		
Windows, sills, sashes, frames			
Walls			
Ceiling			

_____ FLR HALL Floor Plan Letter _____ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Closet doors and frames			
Windows, sills, sashes, frames	0=No paint	1=Cleanable	
Baseboards	1=Good	2=Cleanable with effort	
Walls	2=Fair	3=Not cleanable	
Ceiling	3=Poor		
Floor			

Center ID: _____ - _____
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 Study ID: T _____ - _____
 House ID: _____

____ FLR BEDRM Floor Plan Letter _____ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition		Cleanability		Comments (Cleaning, abatement, repairs)
Doors and frames		0=No paint		1=Cleanable	
Windows, sills, sashes, frames		1=Good		2=Cleanable with effort	
Closet doors and frames		2=Fair		3=Not cleanable	
Baseboards		3=Poor			
Radiators, covers, pipes					
Walls					
Ceiling					
Floor					

____ FLR BEDRM Floor Plan Letter _____ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition		Cleanability		Comments (Cleaning, abatement, repairs)
Doors and frames		0=No paint		1=Cleanable	
Windows, sills, sashes, frames		1=Good		2=Cleanable with effort	
Closet doors and frames		2=Fair		3=Not cleanable	
Baseboards		3=Poor			
Radiators, covers, pipes					
Walls					
Ceiling					
Floor					

____ FLR BEDRM Floor Plan Letter _____ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition		Cleanability		Comments (Cleaning, abatement, repairs)
Doors and frames		0=No paint		1=Cleanable	
Windows, sills, sashes, frames		1=Good		2=Cleanable with effort	
Closet doors and frames		2=Fair		3=Not cleanable	
Baseboards		3=Poor			
Radiators, covers, pipes					
Walls					
Ceiling					
Floor					

Center ID: _____ - _____
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 House ID: _____

___ FLR BEDRM Floor Plan Letter ___ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
Doors and frames	0=No paint	1=Cleanable	
Windows, sills, sashes, frames	1=Good	2=Cleanable with effort	
Closet doors and frames	2=Fair	3=Not cleanable	
Baseboards	3=Poor		
Radiators, covers, pipes			
Walls			
Ceiling			
Floor			

OTHER: _____ Floor Plan Letter ___ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
	0=No paint	1=Cleanable	
	1=Good	2=Cleanable with effort	
	2=Fair	3=Not cleanable	
	3=Poor		

OTHER: _____ Floor Plan Letter ___ Accessibility ()₁ None / rare ()₂ Occasional ()₃ Frequent

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	0=No paint	1=Cleanable	
	1=Good	2=Cleanable with effort	
	2=Fair	3=Not cleanable	
	3=Poor		

Center ID: _____ - _____
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 House ID: _____

OTHER: _____

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
	0=No paint	1=Cleanable	
	1=Good	2=Cleanable with effort	
	2=Fair	3=Not cleanable	
	3=Poor		

OTHER: _____

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
	0=No paint	1=Cleanable	
	1=Good	2=Cleanable with effort	
	2=Fair	3=Not cleanable	
	3=Poor		

OTHER: _____

Area or component	Paint Condition	Cleanability	Comments (Cleaning, abatement, repairs)
	0=No paint	1=Cleanable	
	1=Good	2=Cleanable with effort	
	2=Fair	3=Not cleanable	
	3=Poor		

Center ID: _____ - _____
 Screening ID: S _____ - _____
 Study ID: T _____ - _____
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OTHER: _____

Area or component	Paint Condition		Cleanability		Comments (Cleaning, abatement, repairs)
	0=No paint	1=Good	2=Cleanable with effort	3=Not cleanable	

ADMINISTRATIVE MATTERS

9. **Date of Assessment** _____ / _____ / _____ mm/dd/yy

Dust samples should be collected in the first twenty-five homes assessed plus every tenth home thereafter.

10. **Dust samples collected** ()₀ No ()₁ Yes

11. **TLC Staff** _____
Signature _____ *TLC Code* _____

If an appointment for clean-up was made:

12. **Date of H2** _____ / _____ / _____ mm/dd/yy **Time** _____ : _____

COMMENTS

<i>Center ID:</i>		___ - ___
<i>Screening ID:</i>	S	_____ - ___
<i>Study ID:</i>	T	_____ - ___
<i>House ID:</i>		___

SPECIAL INSTRUCTIONS FOR FAMILY AND/OR CLEANUP CONTRACTOR